

Gulf N Bay

UNIT ALTERATIONS APPLICATION FORM

For processing please email the form and info to allapplications@sunstatemanagement.com

TO: Board of Directors
Gulf n' Bay

DATE: _____

FROM: NAME _____

UNIT# _____

No unit alteration or remodeling work shall be performed in any unit between November 15 through April 15. No work can be started without the Board of Director's approval for the following major alterations.

Circle the appropriate items:

WINDOWS / EXTERIOR DOORS

ALTERATIONS TO INTERIOR WALLS

PLUMBING and/or ELECTRICAL (If permit required)

FLOORING – TILE, LAMINATE, HARDWOOD

KITCHEN / BATH REMODEL

I understand that the installing Contractor for the above installations must be a licensed and insured contractor. I have been informed of the appropriate and current City, County, and/or State Code of these installations and I agree to abide by such requirements. I further agree to abide by the Gulf n' Bay requirements for the above installations.

Name of licensed and insured contractor _____
(proposal attached)

Signature of contractor _____ Date _____

Attached are copies of contractor's license and liability insurance.

Proposed project schedule Start Date _____ Completion Date _____

With the approval of this request I agree to abide by the following conditions:

1. Daily Monday – Saturday 8:30am to 5:00 pm
2. NO WORK ON SUNDAY – EXCEPT FOR EMERGENCY WORK
3. Daily clean up and removal of debris from walkways & elevator

Signature of owner _____

Board of Directors Action: Approved _____ Not Approved _____ Date _____

_____ Board Signature _____